

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

100 34218

## CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|   |               |              |
|---|---------------|--------------|
| TOTAL CLAIMS  | 21            |              |
| FOR   | NUMBER FILED  | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 21 minus 20 = | 1            |
| INDEPENDENT CLAIMS  | 3 minus 3 =   |              |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |               |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

|   |                                  |      |                                    |               |
|---|----------------------------------|------|------------------------------------|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT |      | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   | Total                            | * 17 | Minus                              | ** 21 = 0     |
|   | Independent                      | * 3  | Minus                              | *** 3 = 0     |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |      |                                    |               |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

|           |        |    |           |        |
|-----------|--------|----|-----------|--------|
| RATE      | FEE    |    | RATE      | FEE    |
| BASIC FEE | 370.00 | OR | BASIC FEE | 740.00 |
| X\$ 9=    |        | OR | X\$18=    | 18     |
| X42=      |        | OR | X84=      |        |
| +140=     |        | OR | +280=     |        |
| TOTAL     |        | OR | TOTAL     | 758    |

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

|            |                |    |            |                |
|------------|----------------|----|------------|----------------|
| RATE       | ADDITIONAL FEE |    | RATE       | ADDITIONAL FEE |
| X\$ 9=     |                | OR | X\$18=     |                |
| X42=       |                | OR | X84=       |                |
| +140=      |                | OR | +280=      |                |
| TOTAL      |                | OR | TOTAL      | 0              |
| ADDIT. FEE |                | OR | ADDIT. FEE |                |

|            |                |    |            |                |
|------------|----------------|----|------------|----------------|
| RATE       | ADDITIONAL FEE |    | RATE       | ADDITIONAL FEE |
| X\$ 9=     |                | OR | X\$18=     |                |
| X42=       |                | OR | X84=       |                |
| +140=      |                | OR | +280=      |                |
| TOTAL      |                | OR | TOTAL      | 0              |
| ADDIT. FEE |                | OR | ADDIT. FEE |                |

|            |                |    |            |                |
|------------|----------------|----|------------|----------------|
| RATE       | ADDITIONAL FEE |    | RATE       | ADDITIONAL FEE |
| X\$ 9=     |                | OR | X\$18=     |                |
| X42=       |                | OR | X84=       |                |
| +140=      |                | OR | +280=      |                |
| TOTAL      |                | OR | TOTAL      |                |
| ADDIT. FEE |                | OR | ADDIT. FEE |                |

5/12/05

|   |                                  |      |                                    |               |
|---|----------------------------------|------|------------------------------------|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT |      | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   | Total                            | * 21 | Minus                              | ** 21 = 0     |
|   | Independent                      | * 3  | Minus                              | *** 3 = 0     |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |      |                                    |               |

|   |                                  |   |                                    |               |
|---|----------------------------------|---|------------------------------------|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT |   | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|   | Total                            | * | Minus                              | **            |
|   | Independent                      | * | Minus                              | ***           |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |   |                                    |               |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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